

Painless Civilization and Fundamental Sense of Security

A Philosophical Challenge in the Age of Human Biotechnology

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Abstract

This paper discusses some philosophical problems lurking behind the issues of human biotechnology, particularly prenatal screening. Firstly, prenatal screening technology disempowers existing disabled people. The second problem is that it systematically deprives us of the “**fundamental sense of security**.” This is a sense of security that allows us to believe that we will never be looked upon by anyone with such unspoken words as, “I wish you were never born” or “I wish you would disappear from the world.” Thirdly, we argue that the loss of the fundamental sense of security is connected with the **disappearance of “conviction of love”** in the age of human biotechnology. And finally, all these issues are examined from the viewpoint of “**painless civilization**.” Our society is filled with a variety of “**preventive reduction of pain**,” of which prenatal screening is a good example. By preventively reducing pain and suffering, we lose the chance to transform the basic structure of our way of thinking and being; as a result, we are deprived of opportunities to know precious truths indispensable to our meaningful life. Hence, it is concluded that what is most needed is an academic research on “**philosophy of life**.”

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*The Chapter One of the book *Painless Civilization* has been published as an open access PDF: <https://www.philosophyoflife.org/tpp/painless01.pdf>

1. Introduction

One of the most debated topics today in the field of bioethics is the ethics of manipulating human fertilized eggs, especially for the purpose of selecting a better child or producing an enhanced child. For example, so-called post-humanists encourage progress in this kind of manipulation, saying that there are no serious ethical problems with these technologies. In contrast, Leon Kass and Bill McKibben doubt the progress of these technologies, and caution that they can never offer the happiness we are seeking. In Japan, too, a similar academic discussion has begun among philosophers, bioethicists, and sociologists. In 2003, I published the book [*Painless Civilization*](#), and discussed this topic from the viewpoint of “preventive reduction of pain” and of its fundamental effects on our sense of “love.”⁽¹⁾ After the book’s publication, there appeared a number of comments and criticisms from within and outside the academy. In this paper, I would like to outline some of the points I discussed in the book, and correlate them with discussions in current bioethical debates surrounding this topic.

Before moving on to the discussion of painless civilization, I would like to examine the ethical analysis of prenatal diagnosis in the report, *Beyond Therapy: Biotechnology and the Pursuit of Happiness*, by the President’s Council on Bioethics published in 2003.⁽²⁾ This report was written under the strong influence of the chairman, Leon Kass. Although I do not necessarily agree with Kass’s conservative ideas about abortion and the family, I believe this report is a masterpiece of recent American bioethics, particularly in that the discussion was made in terms of philosophical anthropology. (And as an Asian agnostic philosopher, I really enjoyed their Judeo-Christian flavor in their discussion about ethical issues.)

2. Problem of Disempowerment

This report examines the morality of preimplantation genetic diagnosis (PGD), and points out that “the goal of eliminating embryos and fetuses with genetic defects carries the unspoken implication that certain ‘inferior’ kinds of human beings—for example, those with Down syndrome—do not deserve to live.”⁽³⁾ Of course the use of these technologies will remain voluntary, but “its growing use could have subtly coercive consequences for prospective parents and could increase discrimination against the ‘unfit’.”⁽⁴⁾ The report

says that there is the prospect of “diminished tolerance for the ‘imperfect,’ especially those born with genetic disorders that could have been screened out,” and as a result, disabled children and their parents might be gazed at with unspoken questions, “Why were you born?” and “Why did you let him live?” In the end, “it may become difficult for parents to resist the pressure, both social and economic, of the ‘consensus’ that children with sufficiently severe and detectable disabilities must not be born.”(5)

Their discussion reminds me of voices of Japanese disabled activists. In 1972, disabled people with cerebral palsy began a movement to fight against the government’s effort to introduce a special clause for selective abortion into the Eugenic Protection Law. They harshly criticized the government policy to annihilate disabled babies by way of prenatal diagnosis and selective abortion. They also criticized ordinary non-disabled people’s latent “egoism,” the egoism to think that disabled people do not deserve to live in our society. Disabled activists thought that our society was filled with this kind of discriminative consciousness, and that this hidden consciousness was the real problem of selective abortion.

I wrote about it elsewhere in Japanese and English;(6) hence in this paper, I would like to skip the detailed analysis of their opinions, and try to show my interpretation of their thoughts on prenatal diagnosis and disability. They discussed two problems that lurk behind prenatal diagnosis with selective abortion.

The first problem is that it psychologically disempowers existing disabled people. If such technologies become prevalent in society, many ordinary people gradually come to think in front of them, “Why were congenitally disabled people like you born in the age of prenatal screening?” and “I wish you were not born.” Surrounded by this kind of unspoken words and glances, disabled people are gradually deprived of the power to affirm themselves and the courage to live. In such a society, the majority of people would choose to abort severely disabled fetuses; to existing disabled people, this means that the majority of people do not wish to live with them. Even if they don’t speak out, their unconscious attitudes and glances would naturally express their inner thoughts about disabled people. Looking at such attitudes many times, disabled people will come to fully realize that they are unwelcome guests to the whole society, and this consciousness deprives them of self-affirmation as people with disability.(7)

This is the essence of their view when they were faced with the possibility of selective abortion performed after amniocentesis in the early 1970s. Their idea can be fully applied to future ethical problems that will be caused by PGD and other screening technologies. We can find a similar discussion in the President Council's report. I am surprised by disabled activists' foresight on this point. I would like to talk about this topic later from a different angle.

3. Fundamental Sense of Security

The second problem is that it systematically deprives them of a sense of security and the joy of existence that we feel when we can exist without being imposed upon by anyone regarding any particular conditions. They did not use the words "sense of security," but I believe that one of the messages they tried to express in their fierce activity can be fully grasped by using this term. If this kind of prenatal screening becomes prevalent, disabled people would come to think, "I would not have been born if my parents had undergone current prenatal screening tests," and come to feel that "my existence is not welcomed or blessed by my parents and other people who are accepting such technology in our society." As a result, they would feel they are utterly deprived of a very important sense of security that ordinary healthy people enjoy. Disabled activists at that time accused ordinary people of possessing "inner eugenic thought," and concluded that this was the main cause of discrimination.

I would like to label this feeling a "fundamental sense of security." This is the feeling that one's existence is welcomed unconditionally. This is a sense of trust in the world and society, a sense of trust that provides us with a solid foundation to survive in our society. This is a sense of security that allows me to strongly believe that even if I had been unintelligent, ugly, or disabled, at least my existence in the world would have been welcomed equally, and even if I succeed, fail, or become a doddering old man, my existence will continue to be welcomed. This is the sense of trust that our existence was welcomed when we were born, and will never be denied when we become old or sick. This is a sense of security with which we can believe that we will never be glanced at by anyone with unspoken words, "I wish you were not born" or "I wish you would disappear from the world." This is the basis of our ability to keep sane in this society. Disabled activists tried to stress that prenatal screening is "wrong" because it systematically deprives us of this fundamental

sense of security.

Bioethics to date has not had enough discussion about the fundamental sense of security; yet I believe that this is the most serious problem raised by selective abortion and preimplantation genetic diagnosis. Of course, this is not the sole factor that erodes the fundamental sense of security. Our fundamental sense of security has been eroded by a number of technologies and social systems right to the present. However, it is at least certain that current and future prenatal screening technologies will contribute to enhance the level of erosion of the sense of fundamental security. This is what I have learnt from the literature of disabled people and from discussion with them. Philosophical discussions about contemporary bioethical issues in Japan, including mine, have been greatly influenced, from the beginning, by the thoughts and actions of disabled people. In this sense, Japanese discourse might differ slightly from that of Korea and China. (Another curious factor is “feminism.”[\(8\)](#))

4. Disappearance of “Conviction of Love”

In the previous section, I used the words “the sense that our existence is welcomed unconditionally.” We can find similar expressions in the report of the President’s Council. The council says what is at risk is the idea that “each child is ours to love and care for, from the start, unconditionally, and regardless of any special merit of theirs or special wishes of ours.”[\(9\)](#) If prenatal diagnosis becomes prevalent, the report says, “the attitude of parents toward their child may be quietly shifted from unconditional acceptance to critical scrutiny.”[\(10\)](#) The report discusses this topic from the viewpoint of “unconditional acceptance,” and I think their insight is correct. In the book [*Painless Civilization*](#), I, too, made a detailed discussion on the conditional acceptance of our children and its impact on our society.

Let us imagine a society where almost every adult accepts a set of prenatal screening tests. When a couple wants to have a baby, they make a number of fertilized eggs outside the female’s body, and scrutinize each fertilized egg one by one, using PGD techniques. After examining the characteristics of each egg, they choose a couple of eggs to be born, according to their wishes and plans about their children. What does this society look like? In such a society, people successfully come into the world after it has been confirmed that they satisfy some conditions their parents or society require. This is a society where almost everyone tacitly knows that if they had

not satisfied the conditions required, they would have never been born. And when those people get married and have children, they naturally examine the genetic makeup of their fertilized eggs, and do the same thing that was once done to themselves by their parents. In this way, the act of conditional acceptance of babies is handed down from generation to generation.

In this society, the primary sense, “I was allowed to be born to this world under certain conditions,” is going to be stored in the deep layer of people’s consciousness. This sense erases from people’s mind a certain emotion—the emotion of love. To be loved means to be given the conviction that one’s existence is affirmed by someone even if he/she does not satisfy certain conditions; in other words, to be given the conviction that one’s existence is affirmed and welcomed just as is now the case.

However, in the society described above, it is very hard for people to acquire this kind of conviction. People are born after being examined about their quality of life, and when they give birth they impose conditions upon their children. In that society, people talk about unconditional love; yet they know that they themselves were allowed to be born because they satisfied certain “explicit” conditions imposed by their parents. They perceive the mark of “conditional love” as just beneath their own existence. “Am I, in fact, not loved by anyone?” This is the sense shared by ordinary people in an unspoken way in that society. It is the society that systematically deprives people of “conviction of love.” As is now clear, the greatest problem of prenatal screening and the genetic manipulation of unborn children is that those technologies deprive people of “conviction of love” in a crucial way. This is, I believe, what lies at the heart of an uncomfortable feeling when hearing the justification for selective abortion. Probably this feeling exists even in the hearts of the people who justify selective abortion. This should become the basis for the criticism of human reproductive medicine. It is the “possibility of love” that lies under the ethics of reproductive technology.

This is another version of a philosophical dispute about “conditional love” and “unconditional love.” There have been many discussions about whether only unconditional love deserves the name of love (I discussed this topic elsewhere.)[\(11\)](#) Everyone knows that unconditional love is more beautiful and noble than conditional love, but we also know that it is nearly impossible to love someone unconditionally in real life. We have to look straight at our own egoism and desire. This does not mean that the

justification of our egoism and desire is needed first and foremost, because simple justification frequently leads us in the wrong direction. What is really needed is a deliberate examination, rather than a hasty justification.(12)

5. Painless Civilization

Let us examine why many people choose to abort when a congenital disability, such as Down syndrome, is found in the fetus. There are various reasons for that decision. Some would say that a severe disability will bring great suffering to the child itself in the future, and others would say that it is the duty of the parents to give birth to a baby without any special disabilities in cases where they can be screened. However, I believe that one of the strongest reasons for choosing selective abortion is that parents tend to think that having a disabled baby may cause great pain and suffering to the parents themselves, both economically and psychologically. Many people believe that bringing up a disabled baby would take extra time, money, and hands—and more than anything else, it places a huge mental burden on them.

They try to avoid pain and suffering that may fall upon them in the future, and usually this avoidance is accomplished in a preventive way. I have called this kind of act “preventive reduction of pain” or “preventive elimination of pain.” Selective abortion and prenatal screening are good examples of preventive reduction of pain, because by using these technologies we can expect to reduce, in a preventive way, pain and suffering that would be brought about by having disabled babies. We can find a variety of acts of preventive reduction of pain in our society, from daily health care to “preventive war” carried on by the superpowers. A surveillance society that uses security cameras to prevent unforeseen crimes would be another good example. In contemporary society, we are surrounded by a number of devices to reduce pain. I call a “painless civilization” one in which the mechanism of preventive reduction of pain spreads throughout its society. Society in highly industrialized nations is now gradually turning into a “painless civilization.”

From this perspective, prenatal screening and other future technologies can be seen as examples of devices for preventive reduction of pain, and these devices constitute the dynamism of painless civilization. This means that the ethics of human biotechnology can be seen, or should be seen, from the broader perspective of painless civilization. One of the reasons I use the word “civilization” is that the preventive reduction of pain, which constitutes an

important pillar of current human biotechnology, actually began in ancient times when civilizations developed several thousand years ago. People started agriculture and the maintenance of the rivers in order to preventively reduce pain and suffering caused by the unexpected effects of wild nature, for example, famine and flood. Since then, we have developed big cities, built houses that typhoons cannot destroy, and have established a stable supply of food through the mass production of agricultural goods. These facilities have contributed greatly to the preventive reduction of various kinds of pain. And in an extension of this line of development, today we have a variety of pain reduction methods in our society, including that of prenatal screening.

I have a number of things to say about the development of painless civilization, but anyway, let us go back to the concept of “preventive reduction of pain” here. The biggest problem that comes from the preventive reduction of pain is that it makes us lose sight of the possibility of transforming the basic structure of our ways of thinking and being. Let us imagine the case of a disabled fetus. By developing prenatal screening systems, the probability of having disabled babies will decrease. This may be good news for those who want healthy babies; however, we have to take a closer look at the other side of this issue.

A friend of mine once told me the following story. A man, a close friend of hers, wished to have a cute healthy baby, but when his baby was born, he found it severely disabled. He was shocked. He despaired of the future of his baby and himself. The master plan for his life collapsed. He cared for his child but lost any hope for his future. However, after going through some years of experience of rearing his disabled baby, he suddenly realized that he had escaped despair somewhere along the line. It was a very strange feeling for him. While caring for his child still remained a burden, it was no longer despair. The reason for this was that his basic framework, including his way of thinking, feeling, and being, had been profoundly transformed. This transformation came about because of his encounter with the “unwanted” child, and his continuing care for the child. After experiencing this transformation, he started to feel that his life was not one of despair; hence, he never wanted to go back to life before the birth of the child, because his child taught him many precious truths of life that he had never known before. He finally gained self-affirmation of his life living with his disabled child.

What would have happened if there had been advanced prenatal

screening technologies? He would have had a “healthy” baby, but in exchange for this, he would have lost the chance to attain self-transformation and to know the “precious truths of life” described above. This is the crucial point. (I made a further analysis by using the terms “the desire of the body” and “the joy of life” in the book [*Painless Civilization*](#).) The more we pursue the preventive reduction of pain, the more we lose the chance to transform the basic structure of our way of thinking and being, and the more we are deprived of opportunities to know precious truths indispensable to our meaningful life. Preventive reduction of pain means preventive reduction of the possibility of “the arrival of the other” (the words of Emmanuel Levinas). It leads us to a situation where all of us live in a state of the living dead; in other words, a situation in which we are able to reduce pain and suffering, and are able to gain more pleasure and comfort. But as a result of that, we gradually come to lose the opportunity of experiencing the joy of life that comes from encountering an unwanted situation and being forced to transform ourselves to find a new way of thinking and being we have never known. Remember the discussion about the disappearance of “conviction of love,” discussed in Section 4. It is closely connected to the current topic, because to love someone means to be forced to transform one’s self, and to feel this unexpected transformation as bliss.

The above is the most significant problem that accompanies preventive reduction of pain. One may think that even if there is such a danger in preventive reduction of pain, it does not necessarily mean that we have to stop the development of this kind of technology. This might be so, but please note that what I am primarily concerned about here is not social policymaking but the fate of our contemporary civilization; in other words, the question of what we have to bear as a fate if our current civilization continues to develop in this direction. To clarify the fate of contemporary civilization, and to show a way of escape from our dark future (which, of course, might include the abolishment of certain technologies and policies) is the main criticism of a painless civilization. I believe current bioethical issues must be discussed from this point of view.

6. Conclusion

I think one of the most exciting approaches in the area of bioethics is that of “philosophy,” particularly, that of “philosophy of life.” Hearing this term,

you might imagine an individual's personal perspective on life. However, I mean a broader view that can deal with humans' life and death in contemporary society, our attitudes toward nature and creatures, and the meaning of life in the age of science, capitalism, and globalization. The criticism of painless civilization is also an important part of "philosophy of life." Leon Kass, too, stresses that what is most needed in current bioethics is "philosophy" and a "proper anthropology."([13](#)) I am planning to develop the foundation of "philosophy of life" by communicating with scholars interested in this approach.([14](#)) Philosophy of life deals with not only bioethical issues, but also such topics as environmental issues and the question of the meaning of life in contemporary society. I hope this paper will be of interest to the audience that is trying to tackle difficult and complicated problems around the world caused by contemporary society and civilization.

Author

[Masahiro Morioka](#) (*1958 in Kochi, Japan) is a professor of philosophy and ethics at Osaka Prefecture University, Japan. He published seventeen books in Japanese, including *Painless Civilization* (2003), *The Insensitive Man* (2005), *Life Studies Approaches to Bioethics* (2001), and *Brain Dead Person* (1989). He has proposed "life studies" and "philosophy of life" as new interdisciplinary research frameworks. He is the director of International Network for Life Studies, and one of the co-editors of *Eubios Journal of Asian and International Bioethics*. (Currently the author works for Waseda University.)

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9. *Beyond Therapy*, p. 71.
10. *Beyond Therapy*, p. 54.
11. See Morioka, *Painless Civilization*, Chapter 2
12. See Morioka, *Painless Civilization*, Chapter 2
13. Leon Kass, *Life, Liberty and the Defence of Dignity: The Challenge for Bioethics*. Encounter Books, 2002, p. 18.
14. Those interested in “Philosophy of Life Project” please visit <www.lifestudies.org/lifestudies.html> and send us an [e-mail](#). We don't have any special relationship with religious groups or political parties.